Discharge fund 2022-23 Funding Template

2. Cover







Please Note:

Version 1.0.0

- You are reminded that much of the data in this template, to which you have privileged access, is management information only and is not in the public domain. It is not to be shared more widely than is necessary to complete the return.
- Please prevent inappropriate use by treating this information as restricted, refrain from passing information on to others and use it only for the purposes for which it is provided. Any accidental or wrongful release should be reported immediately and may lead to an inquiry. Wrongful release includes indications of the content, including such descriptions as "favourable" or "unfavourable".
- This template has been produced for areas to confirm how the additional funding to support discharge from hospital and bolster the social care workforce will be spent in each area. The government has also produced guidance on the conditions attached tothis funding, that you should ensure has been followed.
- This template collects detailed data on how the funding allocated to each area will be spent. The portion of the funding that is allocated via Integrated Care Boards (ICBs) does not have a centrally set distribution to individual HWBs. ICBs should agree with local authority partners how this funding will be distributed and confirm this distribution in a separate template. The amount pooled into the BCF plan for this HWB from each ICB should also be entered in the expenditure worksheet of this template (cell N31) (The use of all funding should be agreed in each HWB area between health and social care partners.

Health and Wellbeing Board:	Birmingham
Completed by:	Sarah Feeley
E-mail:	sarah.feeley@birmingham.gov.uk
	Saramiecie y Sirinigham govian
Contact number:	7704538632

Please confirm that the planned use of the funding has been agreed between the local authority and the ICB and indicate who is signing off the plan for submission on behalf of the HWB (delegated authority is also accepted):

Confirm that use of the funding has been agreed (Yes/No)	Yes
Job Title:	Strategic Director Adult Social Care
Name:	Professor Graeme Betts

If the following contacts have changed since your main BCF plan was submitted, please update the details.

	If the following contacts have changed since your main BCF plan		please update the details.		
		Professional			
		Title (e.g. Dr,			
	Role:	Cllr, Prof)	First-name:	Surname:	E-mail:
*Area Assurance Contact Details:	Health and Wellbeing Board Chair	Cllr	Mariam	Khan	mariam.khan@birmingha
Area Assurance Contact Details:					m.gov.uk
	Integrated Care Board Chief Executive or person to whom they		Paul	Athey	paul.athey@nhs.net
	have delegated sign-off				
	Local Authority Chief Executive		Deborah	Cadman	deborah.cadman@birming
					ham.gov.uk
	LA Section 151 Officer		Rebecca	Hellard	rebecca.hellard@birmingh
					am.gov.uk
Please add further area contacts that					
you would wish to be included in					
official correspondence e.g. housing					
or trusts that have been part of the					
process>					

When all yellow sections have been completed, please send the template to the Better Care Fund Team england.bettercarefundteam@nhs.net saving the file as 'Name HWB' for example 'County Durham HWB'. Please also copy in your Better Care Manager.

Discharge fund 2022-23 Funding Template

5. Expenditure

Selected Health and Wellbeing Board:	Birmingham
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Source of		Amount pooled	Planned spend
funding			
LA allocation		£4,666,913	£4,666,193
	NHS Birmingham and Solihull ICB	4244000	
ICB allocation		Please enter amount pooled from ICB	
		Please enter amount pooled from ICB	

Yellow sections indicate required input

Scheme ID	Scheme Name	Brief Description of Scheme (including impact on	Scheme Type	Sub Types	Please specify if 'Scheme Type' is	Estimated number of	Setting	Spend Area	Commissioner	Source of Funding	Planned Expenditure
		reducing delayed			'Other'	packages/benefi					(£)
		discharges).				ciaries					
1	P1 Capacity	Purchasing additional P1	Home Care or Domiciliary Care	Domiciliary care to		396 citizens with		Social Care	Birmingham	Local authority	£500,000
		capacity to meet increased		support hospital		6 weeks of initial				grant	
		demand over the winter		discharge		care (1.5 hours					
2	Mental Health	Mental Health Homeless	Bed Based Intermediate Care	Step down (discharge		15 beds and 40		Mental Health	NHS Birmingham and	ICB allocation	£200,000
	Wraparound P2	Pathway	Services	to assess pathway 2)		citizens			Solihull ICB		
2	Care Provider	Direct funding to	Improve retention of existing	Incentive payments			Both	Social Care	Birmingham	ICB allocation	£3,024,000
3	Workforce -	independent care providers		incentive payments			Восп	Social Care	Diritingnam	icb allocation	13,024,000
	Recruitment and	to pay recruitment and	Workforce								
1	Care Provider	Direct funding to	Improve retention of existing	Incentive payments			Both	Social Care	Birmingham	Local authority	£3,016,193
_	Workforce -	independent care providers	workforce	meentive payments			Both	Joeial Care	Diriningnam	grant	13,010,133
	Recruitment and	to pay recruitment and	Workingtee							Branc	
5	Care Home High	Additional support to	Bed Based Intermediate Care	Other	Providing			Social Care	Birmingham	ICB allocation	£300,000
	Intensity	enable Care Homes to	Services		enhanced			000.0.0	J		
	,,	accept existing residents			healthcare at						
6	Mental Health	Step-down provision for	Other		Capacity to			Mental Health	Birmingham	Local authority	£300,000
	Homeless	homeless citizens from			ensure homeless					grant	ŕ
	Pathway	acute mental health care			complex mental						
7	Discharges	Bespoke care packages for	Other		Bespoke		Both	Social Care	NHS Birmingham and	ICB allocation	£300,000
	outside of existing	citizens with complex needs			packages for				Solihull ICB		
	pathways	that cannot be met through			citizens who						
8	BCC Assessment	Provide additional capacity	Increase hours worked by	Overtime for existing				Social Care	Birmingham	Local authority	£500,000
	and Coordination	for social woker assessment	existing workforce	staff.						grant	
	Capacity	and brokerage functions									

10	BCC Assessment and Coordination Capacity Contingency Mental Health Step-down provision	ordination capacity by payment of retention Contingency	Improve retention of existing workforce Contingency Home Care or Domiciliary Care	Retention bonuses for existing care staff Domiciliary care to			Birmingham	Local authority grant Local authority	£250,000
10	Capacity Contingency Mental Health Step-down	payment of retention Contingency Step - down provision for MFFD mental health	Contingency			Social Care	Birmingham	Local authority	£100,000
11	Contingency Mental Health Step-down	Contingency Step - down provision for MFFD mental health		Domiciliary care to		Social Care			£100,000
11 !	Mental Health Step-down	Step - down provision for MFFD mental health		Domiciliary care to		Social Care			£100,000
:	Step-down	MFFD mental health	Home Care or Domiciliary Care	Domiciliary care to				grant	
	p-010.01	F 4 6 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7 6 7		support hospital discharge	20-30 at any one time		NHS Birmingham and Solihull ICB	ICB allocation	£420,000
				unseriar ge					

Scheme types and guidance

This guidance should be read alongside the addendum to the 202

The scheme types below are based on the BCF scheme types in mathematical been added that relate to activity to retain or recruit social care was elect 'other' as a main scheme type. That option should only be u

The conditions for use of the funding (as set out in the addendum funding. Funding should be pooled into local BCF agreements as ar between ICBs and local government on the planned spend.

The relevant Area of Spend (Social Care/Primary Care/Community

The expenditure sheet can be used to indicate whether spending is

This funding is being allocated via:

- a grant to local government (40% of the fund)
- an allocation to ICBs (60% of the fund)

Both elements of funding should be pooled into local BCF section ?

Once the HWB is selected on the cover sheet, the local authority a BCF pool will also appear on the expenditure sheet. The amount the template that confirms the distribution of the funding across HWB

When completing the expenditure plan, the two elements of fundiwith the second tranche dependent on an area submitting a spenc funding. Further reporting is also expected, and this should detail end of year reporting, will be circulated separately)

Local areas may use up to 1% of their total allocation (LA and ICB)

For the scheme types listed below, the number of people that will is being purchased with part of the funding, it should be indicated

Assistive Technologies and Equipment Home Care or Domiciliary Care Bed Based Intermediate Care Services Reablement in a Person's Own Home Residential Placements

Scheme types/services

Assistive Technologies and Equipment

Home Care or Domiciliary Care
Bed Based Intermediate Care Services
Reablement in a Person's Own Home
Residential Placements
Increase hours worked by existing workforce
Improve retention of existing workforce
milprove recention of existing worklorde
Additional annual advantage of severe the forces are more than an area.
Additional or redeployed capacity from current care workers
Local recruitment initiatives
Other

Administration		

2-23 BCF Policy Framework and Planning Requirements.

ain BCF plans, but have been amended to reflect the scope of the funding. Additional scheme types have orkforce. The most appropriate description should be chosen for each scheme. There is an option to sed when none of the specific categories are appropriate.

to the 2022-23 BCF Policy Framework and Planning Requirements) confirm expectations for use of this addition to existing section 75 arrangements. Local areas should ensure that there is agreement

Health/Mental Health/Acute Care) should be selected

s commissioned by the local authority or the ICB.

75 agreements.

llocation will pre populate on the expenditure sheet. The names of all ICBs that contribute to the HWB's nat each ICB will pool into each HWB's BCF must be specified. ICBs are required to submit a separate is in their system. (Template to be circulated separately).

ing that is being used for each line of spend, should be selected. The funding will be paid in two tranches, ling plan 4 weeks after allocation of funding. The plan should cover expected use of both tranches of the actual spend over the duration of the fund. (An amended reporting template for fortnightly basis and

for reasonable administrative costs associated with distributing and reporting on this funding.

benefit from the increased capacity should be indicated - for example where additional domiciliary care how many more packages of care are expected to be purchased with this funding.

Sub type

- 1. Telecare
- 2. Community based equipment
- Other

1.	Domiciliary care packages
2.	Domiciliary care to support hospital discharge
3.	Domiciliary care workforce development
4.	Other
1.	Step down (discharge to assess pathway 2)
2.	Other
_	
1.	Reablement to support to discharge – step down
2.	Reablement service accepting community and discharge
3.	Other
1.	Care home
2.	Nursing home
3.	Discharge from hospital (with reablement) to long term care
4.	Other
1.	Childcare costs Overtime for existing staff
2.	Overtime for existing staff.
1.	Retention bonuses for existing care staff
2.	Incentive payments
3.	Wellbeing measures
•	
4.	Bringing forward planned pay increases
1.	Costs of agency staff
2.	Local staff banks
3.	Redeploy other local authority staff
	,

Notes	home care?
You should include an expected number of	
beneficiaries for expenditure under this	
category	Υ

You should include an expected number of	
beneficiaries for expenditure under this	V
category	Y
You should include an expected number of	
beneficiaries for expenditure under this	
category	N
category	IN IN
You should include an expected number of	
beneficiaries for expenditure under this	
category	Y
category	'
You should include an expected number of	
beneficiaries for expenditure under this	
category	N
	.,
You should indicate whether spend for this	
category is supporting the workforce in:	
- Home care	
- Residential care	Area to indicate
- Both	setting
You should indicate whether spend for this	
category is supporting the workforce in:	
- Home care	
- Residential care	Area to indicate
- Both	setting
You should indicate whether spend for this	
category is supporting the workforce in:	
- Home care	
- Residential care	Area to indicate
- Both	setting
You should indicate whether spend for this	
category is supporting the workforce in:	
- Home care	
- Residential care	Area to indicate
- Both	setting
You should minimise spend under this	
category and use the standard scheme	Area to indicate
types wherever possible.	setting
· · · · · · · · · · · · · · · · · · ·	

Areas can use up to 1% of their spend to	
cover the costs of administering this	
funding. This must reflect actual costs and	
be no more than 1% of the total amount	
that is pooled in each HWB area	NA

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